



AF

TFW
1646

PTO/SB/82 (09-03)

**REVOCATION OF POWER OF
ATTORNEY WITH
NEW POWER OF ATTORNEY
AND
CHANGE OF CORRESPONDENCE ADDRESS**

Application Number	10/086,177
Filing Date	February 26, 2002
First Named Inventor	Tudan, et al.
Art Unit	1646
Examiner Name	Unassigned
Attorney Docket Number	080421-000100US

I hereby revoke all previous powers of attorney given in the above-identified application:

☐ A Power of Attorney is submitted herewith.

OR

☒ I hereby appoint the practitioners associated with the Customer Number:

20350

☒ Please change the correspondence address for the above-identified application to:

☒ The address associated with
Customer Number: **20350**

OR

☐ Firm or
Individual Name

Address

Address

City

State

ZIP

Country

Telephone

Fax

I am the:

☐ Applicant/inventor.

☒ Assignee of record of interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/56)

SIGNATURE of Applicant or Assignee of Record

Name

University of British Columbia

Signature

Date

Nov 3/04

Telephone

604-822-8166

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ Total of 1 forms are submitted.



Attorney Docket No.

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Tudan, et al.Application No./Patent No.: 10/086,177 Filed/Issue Date: February 26, 2002Entitled: CXCR4 Agonist Treatment of Hematopoietic CellsUniversity of British Columbia, a university
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☐ the assignee of the entire right, title, and interest; or
2. ☒ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is 50 %
in the patent application/patent identified above by virtue of either:

- A. ☒ An assignment from the inventor(s) of the patent application/patent identified above. The assignment was recorded in the United States Patent and Trademark Office at Reel 013152, Frame 0558, or for which a copy thereof is attached.

OR

- B. ☐ A chain of title from the inventor(s), of the patent application/patent identified above, to the current assignee as shown below:

1. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

2. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____
The document was recorded in the United States Patent and Trademark Office at
Reel _____, Frame _____, or for which a copy thereof is attached.

☐ Additional documents in the chain of title are listed on a supplemental sheet.

- ☐ Copies of assignments or other documents in the chain of title are attached.
[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3. If the assignment is to be recorded in the records of the USPTO. See MPEP 302.6]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Signature

David P. Jones

Associate Director

Printed or Typed Name Industry Liaison

Title

02/21/04
Date604-822-8166

Telephone Number



PTO/SB/82 (09-03)

**REVOCATION OF POWER OF
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Application Number	10/086,177
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First Named Inventor	Tudan, et al.
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I am the:

☐ Applicant/Inventor.

☒ Assignee of record of interest. See 37 CFR 3.71.
Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)

SIGNATURE of Applicant or Assignee of Record

Name

Chemokine Therapeutics Corporation

Signature

Hassan S.

Date

Feb. 03 - 2005

Telephone

604-822-0304

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

☒ *Total of 1 forms are submitted.



Attorney Docket No.

STATEMENT UNDER 37 CFR 3.73(b)Applicant/Patent Owner: Tudan, et al.Application No./Patent No.: 10/086,177 Filed/Issue Date: February 26, 2002Entitled: CXCR4 Agonist Treatment of Hematopoietic CellsChemokine Therapeutics Corporation, a corporation
(Name of Assignee) (Type of Assignee, e.g., corporation, partnership, university, government agency, etc.)

states that it is:

1. ☐ the assignee of the entire right, title, and interest; or
2. ☒ an assignee of less than the entire right, title and interest.
The extent (by, percentage) of its ownership interest is 50 %

in the patent application/patent identified above by virtue of either:

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Reel _____, Frame _____, or for which a copy thereof is attached.

3. From: _____ To: _____

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[NOTE: A separate copy (i.e., a true copy of the original assignment document(s)) must be submitted to Assignment Division in accordance with 37 CFR Part 3, if the assignment is to be recorded in the records of the USPTO. See MPEP 302.8]

The undersigned (whose title is supplied below) is authorized to act on behalf of the assignee.

Hassan Salari
Signature

HASSAN SALARI
Printed or Typed Name

President & CEO
Title

Feb. 03. 05
Date

604-882-0304
Telephone Number



PTO/SB/21 (09-04)

**TRANSMITTAL
FORM**

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5

Application Number

10/086,177

Filing Date

February 26, 2002

First Named Inventor

Christopher TUDAN

Art Unit

1647

Examiner Name

Bunner, Bridget E.

Attorney Docket Number

080421-000100US

ENCLOSURES (Check all that apply)

- ☐ Fee Transmittal Form
☐ Fee Attached
☐ Amendment/Reply
☐ After Final
☐ Affidavits/declaration(s)
☐ Extension of Time Request
☐ Express Abandonment Request
☐ Information Disclosure Statement

☐ Certified Copy of Priority Document(s)
☐ Reply to Missing Parts/ Incomplete Application
☐ Reply to Missing Parts under 37 CFR 1.52 or 1.53

- ☐ Drawing(s)
☐ Licensing-related Papers
☐ Petition
☐ Petition to Convert to a Provisional Application
☒ Power of Attorney, Revocation Change of Correspondence Address*
☐ Terminal Disclaimer
☐ Request for Refund
☐ CD, Number of CD(s) _____
☐ Landscape Table on CD

- ☐ After Allowance Communication to TC
☐ Appeal Communication to Board of Appeals and Interferences
☐ Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
☐ Proprietary Information
☐ Status Letter
☒ Other Enclosure(s) (please identify below):
Return Postcard;*Revocation and Power by Chemokine Therapeutics Corporation attaching Statement Under 37 CFR 3.73(b) (2 pgs.); and Revocation and Power by University of British Columbia attaching Statement Under 37 CFR 3.73(b) (2 pgs.).

Remarks

The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name

Townsend and Townsend and Crew LLP

Signature

Printed name

Kenneth A. Weber

Date

January 12, 2006

Reg. No.

31,677

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.

Signature

Typed or printed name

Jo Ann Honcik Dallara

Date

January 12, 2006